

DATE:

PHONE:

Return completed form to:

LOAN STATUS UPDATE FORM (05/04)

PHONE:

MDHE c/o ASA UPDATE P.O. Box 55757, Boston, MA 02205, Fax: (617) 521-6215, Email: mdheadjustments@amsa.com

SECTION II. DODDOV	VED/STUDENT DEMOCE	DARWIC DATA C	LI A NI	CE ITEM 2 DEO	IIIDE	:D						
SECTION I: BORROWER/STUDENT DEMOGRAPHIC DATA CHAI 1. Borrower last name Firs						MI D	2. Borrowei	· SSI	N (required)			
1. Bollower last flame			Thornamo				, , ,					
							3. Borrowei	SSI	N change			
4. Student last name (PLUS only) Fit				rst name		MI	5. Student	SSN	change (PLUS	only)		
6. Address (□ Mailing □ Permanent □Employer) C			City	ity S			Zip Code					
7. Phone # (□ Residence □ Employer)			8. E-mail									
SECTION II: STUDEN	IT ENROLLMENT DATA	CHANGE- ITEM	9 RE	EQUIRED. ITEM 1	3 RE	QUIRED	FOR LENDE	R/SE	RVICER REPO	RT		
9. Student SSN	10. □ Full Tim	10. □ Full Time □ Half-Time □ Less than Half-time										
□ Withdrawn □	l □ Graduated	□ Graduated □ Leave of Absence □ Deceased										
11. Enrollment Status	12. Anticipate	12. Anticipated Graduation Date										
13. Enrollment Certificender/servicer enroll	School Certific	School Certification Date School Name (required) & OE Code (optional)										
	ons III, IV, and V below:									idati	on)	
SECTION III: DISBURSEMENT DATA CHANGE – UNIQUE LOAN ID OR GUARANTEE DATE/LOAN TYPE/SSN REQUIRED 18. Original Disb												
	16. Guarantee		1	Date & Number	er Revised		Gross Disb		Revised Gross		22. Cancel or	
15. Unique Loan ID	Date/Loan Type/SSN	17. Action*	+	(e.g. 1, 2, etc.)	Dis	b Date	Amt.		Disb Amt.		Refund Amt.	
*17. Action: Cancel (full or partial cancellation	n before or after	disk	oursement): Reins	state	(previous	 slv cancelled	/not	disbursed): Re	issu	e (disbursed):	
	complete Section II), Inc					(,,		. (,,	
SECTION IV: LOAN F	PERIOD CHANGE - UNIO	QUE LOAN ID <u>of</u>	GU.	ARANTEE DATE/I			SN REQUIRE		Current Loan	20	Revised Loan	
23. Unique Loan ID 24. Guarantee Date/Lo		Loan Type/SSN	oan Type/SSN		Period Begin Date						eriod End Date	
SECTION V: LOAN D	ATA FOR LENDER/SER	VICER USE ONL	Υ – ι	JNIQUE LOAN ID	OR (GUARANT	EE DATE/LO	OAN	TYPE/SSN REC	QUIR	ED	
29. Repayment begin			e/Loan Type/SSN	Loan Type/SSN		Begin Date		First Due Date		Term (months)		
30. Deferment Unique Loan ID		Guarantee	Date	e/Loan Type/SSN		Be	Begin Date		End Date			
31. Forbearance Unique Loan ID		Guarantee	Guarantee Date/Loan Type/SSN			Be	Begin Date		End Date			
32. Uninsured/Cured Unique Loan ID		Guarantee	Guarantee Date/		/Loan Type/SSN		Uninsured Date		Jninsured Type ¹	, (Cure Date	
33. Paid in Full Unique Loan ID		Guarantee	Date	/Loan Type/SSN		PIF	PIF Type⁺		PIF Date		Reversal	
⁺Use NSLDS Codes				I								
SCHOOL NAME:				LENDER/SERVICER NAME:								

DATE: